U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only	LV PETCOL PRODUCTIVO PETCOL
E Recd READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.
CAMS OF ST	
1. File Number U - /2///	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Paul C. Ahrens	Name Affil Prop Craftspersons IATSE #44
	Labor Organization File Number 001-045
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 4591 Glenalbyn Drive	Street 12021 Riverside Drive
City Los Angeles	City North Hollywood
State CA ZIP Code + 4 9 0 0 6 5 - 3 9 3	8 State CA ZIP Code + 4 91607
5. Position in labor organization. Assistant Secretary	-Treasurer (effective October 7, 2004)
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of	
monetary value from an employer whose employees your organizati	on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
Name and address of Employer (including trade name, if any).	7.a. Nature of interest, fransaction, of income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street	T.J. AHOURG
City	
State ZIP Code + 4	
	nature
Sign  15. Signature and verification. The undersigned declares, under penalty of	Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the
Sign  15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany).	Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Paul C. Ahrens	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is activally any part of which consists of buying from or selling or leasing directly or included with your labor organization or with a trust in which your labor organization.	erwise dealing with the business tively seeking to represent, or ndirectly to, or otherwise	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Ahrens Prop & Set Services Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any Street 4591 Glenalbyn Drive	b. Trust  X c. Employer	
City Los Angeles State CA ZIP Code + 4 90065-393	38	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	-/-w-dyi
Name Please see attached sheet Trade Name, if any:	The rental of and providing of tool and equipment to motion picture/ television productions.	<b>S</b>
P.O. Box, Bldg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing. Gross=\$19,70	0.0
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4	Ahrens Prop & Set Services is own 100% by two partners: Paul C. Ahre and Anne H. Ahrens (husband and wi [ The approximate value of the company is \$25,000.00]	ns
	12.b. Amount. \$25,000,00	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	ler parts A and B above) y or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name	· 【 · 表 · · · · · · · · · · · · · · · ·	
Trade Name, if any:		ericens promote and management and a
P.O. Box, Bldg., Room No., if any		
P.O. Box, Bldg., Room No., if any		

## FORM LM-30. Attachment for Paul C. Ahrens. Year 2004. (Labor Org. File #001-045)

## Question 10.

The following motion picture production companies and/or motion picture payroll companies paid the following equipment rental monies counted as gross receipts in the year 2004.

To Paul C. Ahrens

Cast and Crew Production Services \$14,280.00 100 E. Tujunga Avenue Burbank, CA 91502

To Anne H. Ahrens

Twentieth Century Fox Film Corp. \$4,860.00 P.O. Box 900 Beverly Hills, CA 90213

Entertainment Partners (GEP Management Services, LLC) \$560.00 P.O. Box 7836 Burbank CA 91510-7836